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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

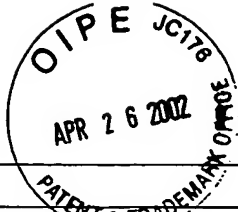
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<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="margin: 5px 0;">(to be used for all correspondence after initial filing)</p>		Application Number	10/046,924			
		Filing Date	January 14, 2002			
		First Named Inventor	CASES, SYLVAINÉ			
		Group Art Unit	To Be Assigned			
		Examiner Name	To Be Assigned			
Total Number of Pages in This Submission	5 + 14 cited references	Attorney Docket Number	UCAL240CIP			
ENCLOSURES (check all that apply)						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) PTO/SB/08A (3 pgs.) 2) 14 cited references 3) Return Postcard </td> </tr> </table>				<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) PTO/SB/08A (3 pgs.) 2) 14 cited references 3) Return Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm or Individual Name	PAULA A. BORDEN, Reg. No. 42,344					
Signature						
Date	April 18, 2002					

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: April 18, 2002.		
Typed or printed name	Cindy Kim Hoang	
Signature		Date
		April 18, 2002

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Typed or Printed Name	Cindy Kim Hoang		
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INFORMATION DISCLOSURE STATEMENT Address to: Commissioner for Patents Washington, D.C. 20231		Attorney Docket	UCAL240CIP
		First Named Inventor	CASES, SYLVAIN
		Application Number	10/046,924
		Confirmation No.	To Be Assigned
		Filing Date	January 14, 2002
		Group Art Unit	To Be Assigned
		Examiner Name	To Be Assigned
		Title:	

Sir:

This is an Information Disclosure Statement submitted for the Examiner's consideration. A Form PTO-SB/08A listing the references and copies of the cited references accompany this paper. Applicants would appreciate the Examiner's initialing and returning the form to indicate that the references have been reviewed and made of record.

The first sixteen references identified herein were disclosed in parent application serial number 09/794,715, filed 2/26/2001 and as such, copies thereof are not included pursuant to the provisions of 37 CFR § 1.98(d).

This Information Disclosure Statement is not intended as a representation that a search has been made, that additional information material to the examination of this application does not exist, or that any one of the above references constitutes prior art to the present application within the meaning of 35 U.S.C. § 102.

As applicants have not yet received a first Action on the merits, no fee is believed to be required for filing this Disclosure Statement. If, however, the PTO finds that for some reason a fee is due, our Deposit Account No. 50-0815, Order No. UCAL240CIP may be charged thereon.

Respectfully submitted,
BOZICEVIC, FIELD & FRANCIS LLP

Date: April 18, 2002

By:
Paula A. Borden
Registration No. 42,344

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